

Attorney's Docket No. 4824

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

| This | declaration | is | of | the | following | type: |
|------|-------------|----|----|-----|-----------|-------|
| | | | | | | |

| original |
|----------------------------|
| design |
| supplemental |
| national stage of PCT |
| divisional |
| continuation |
| continuation-in-part (CIP) |
| |

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor or an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

ARSENIC REMOVAL MEDIA

SPECIFICATION IDENTIFICATION

the specification of which:

| (a) | is attached hereto. | |
|-----|------------------------------------------------------------------------------|---------|
| (b) | was filed on November 15, 2001 as ■ Serial No. 10/002,458 □ Express Mail No. | , a |
| | Serial No. not yet known and was amended on | |
| (c) | was described and claimed in PCT International Application No. | _ and a |
| | amended under PCT Article 19 on | |

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

In compliance with this duty there is attached an information disclosure statement, 37 CFR 1.97.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

| (d) | no such applications have been filed. |
|-----|-----------------------------------------------|
| (e) | such applications have been filed as follows. |

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefits under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information that is material to the examination of this application, namely, information where there is substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

| U.S. APPLICATIONS | FILING DATE | STATUS |
|-------------------|-------------|--------|
| | : | |
| | | |
| | | 1 200 |
| | | |

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Stephen I. Miller, Reg. No. 27,927 Raymond F. Keller, Reg. No. 28,960 Russell G. Lindenfeldar, Reg. No. 39,750

Richard A. Negin, Reg. No. 28,649 Jack Matalon, Reg. No. 22,441

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO:

Chief Patent Counsel
Engelhard Corporation
101 Wood Avenue
P.O. Box 770
Iselin, New Jersey 08830-0770

Stephen I. Miller (732) 205-5181

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURES

| Full name of sole or first inver | tor Thomas J. Shaniuk |
|----------------------------------|-------------------------------------------------------------------|
| Inventor's signature | Thomas J. Shaniuk Thomas J. Shaniuk Country of Citizenship USA. |
| Date 11/29/01 | Country of Citizenship <u>USA.</u> |
| Residence | 10134 Huntington Park Drive, Strongsville, Ohio 44136 |
| Post Office Address | Same as above |
| | |
| Full name of second joint inve | ntor |
| Inventor's signature | |
| Date | Country of Citizenship |
| Residence | |
| Post Office Address | |

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

| Signature for third and subsequent joint inventors. Number of pages added |
|----------------------------------------------------------------------------------------------------------------------------------------|
| Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added |
| Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added |
| **** |
| Added pages to combined declaration and power of attorney for divisional, continuation or continuation-in-part (CIP) application. |
| □ Number of pages added |
| **** |
| Authorization of attorney(s) to accept and follow instructions from representative. |
| **** |
| |
| If no further pages form a part of this Declaration, then end this Declaration with this page and check the following item |
| This declaration ends with this page |